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CONFIRMATION NO. 4935

<b>SERIAL NUMBER</b> 10/597,691	<b>FILING or 371(c) DATE</b> 10/16/2006 <b>RULE</b>	<b>CLASS</b> 071	<b>GROUP ART UNIT</b> 4158	<b>ATTORNEY DOCKET NO.</b> KUEHN -1 PCT		
<b>APPLICANTS</b> Julia Kuehn, Weilheim/Teck, GERMANY; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DE05/00154 02/01/2005 <b>** FOREIGN APPLICATIONS *****</b> GERMANY 10 2004 005 352.9 02/03/2004 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 03/26/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/VICTORIA J HICKS/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 3	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> COLLARD & ROE, P.C. 1077 NORTHERN BOULEVARD ROSLYN, NY 11576 UNITED STATES						
<b>TITLE</b> Protective collar for the therapeutic protection of the head and face of very young children						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			